

LIBRARY SERVICES AND TECHNOLOGY ACT GRANT APPLICATION FORM – FY 2008

TYPE OF GRANT ☐ **Large** ☐ **Midsize** ☐ **SDLN/Information Access**

Total LSTA Funds Requested _____ (from Part VI)

LSTA Priority being addressed _____ (from Part V)

LSTA Goals being addressed _____ (from *South Dakota Libraries for the 21st Century: an LSTA Five Year Plan 2008-2013*)

I. Applicant Information

Name of Library/Consortium _____

Complete Address of Applicant _____

Project Coordinator _____

Phone Number _____ Fax _____

E-mail address _____

Attach list of consortium members if applicable.

II. Project Data

Describe geographic area impacted by project _____

Population of impacted area _____

Projected duration of Project (cannot exceed two years) _____

Include projected begin and end dates

III. General Description of Project

Describe why the project is needed, who will be impacted, what is the goal of the project, how project will be accomplished, measurable objectives based on Outcomes by Evaluation format, etc. Attach narrative.

IV. Evaluation

How the effectiveness of this project be evaluated over the next year. Describe what will be measured and the methodology used to collect the data. You will be asked to complete an evaluation at the end of the project year and a follow-up more comprehensive evaluation one year later. Attach narrative.

V. Relation of Project to LSTA goals

How will this project contribute to the improvement of library services in South Dakota and to meeting the goals stated in **South Dakota Libraries for the 21st Century: an LSTA Five Year Plan 2008-2013**? Which of the LSTA Priorities are addressed and how? Attach narrative.

Federal LSTA priorities set forth in Sec. 206. Grants to States are:

1. Expanding services for learning and access to information and educational resources in a variety of formats, in all types of libraries, for individuals of all ages;
2. Developing library services that provide all users access to information through local, State, regional, national, and international electronic networks;
3. Providing electronic and other linkages among and between all types of libraries;
4. Developing public and private partnerships with other agencies and community-based organizations;
5. Targeting library services to individuals of diverse geographic, cultural, and socioeconomic backgrounds, to individuals with disabilities, and to individuals with limited functional literacy or information skills; and,
6. Targeting library and information services to persons having difficulty using a library and to underserved urban and rural communities, including children (from birth through age 17) from families with incomes below the poverty line (as defined by the Office of Management and Budget and revised annually in accordance with section 673(2) of the Community Services Block Grant Act (42 U.S.C. 9902(2))) applicable to a family of the size involved."

VI. Project Budget

Budget Category	LSTA Funds	Local Match	Total
Contractual	_____	_____	_____
Software/Materials	_____	_____	_____
Supplies	_____	_____	_____
Equipment	_____	_____	_____
Other	_____	_____	_____
TOTALS	_____	_____	_____

Describe what you are including within each category and indicate their purpose in fulfilling the stated objectives. Attach narrative.

NOTE: Equipment purchases that exceed \$5000 in value require approval from the IMLS Office in addition to approval by the State Library Board.

VII. Authorization of Request

We, the undersigned, (1) understand the conditions and requirements set forth in the Library Services and Technology Act of 2003 (20 U.S.C. § 9101 *et. seq.*), the Codified Laws of South Dakota (14-2) and the Administrative Rules of South Dakota (24:30:04:01-12) and (2) on behalf of the city/county, school district, or other administrative agency that supports this library, agree to adhere to them. We certify that this application has been approved by the appropriate authority of the Library.

Project Administrator _____
Signature Typed Date

Library Director _____
Signature Typed Date

Chairperson _____
Public Library Signature Typed Date
Board of Trustees

Governmental Official _____
authorized to receive Signature Typed Date
and disburse funds, if different than above